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DEPARTMENT OF PUBLIC HEALTH NURSING

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NATIONAL ORGANIZATION FOR PUBLIC HEALTH NURSING THE CHILD HEALTH ORGANIZATION OF AMERICA

BY GRACE HALLOCK

SALLY LUCAS JEAN, Director of the Child Health Organization of America, believes that the increased interest in health teaching in the schools has grown out of an idea,—the idea that health can be made interesting to children themselves. In describing the founding and growth of the Child Health Organization of America, Miss Jean said:

When a Committee of the Pediatric Section of the New York Academy of Medicine sent a representative to Washington four years ago to confer with Franklin K. Lane, then Secretary of the Department of the Interior, about the prevalence of malnutrition among school children in New York, there was little thought of the tremendous strides to be taken within a few years. Mr. Lane immediately urged the formation of a national group to raise the health standard of the American School Child. With the confidence of such a statesman invitations were extended to educators and socially minded individuals living in all sections of the country. The response was amazing, all accepting but two from a list of twenty-seven. A small budget was raised and the Child Health Organization launched.

Just how a new private association could assist a federal department, as they were invited to do, was somewhat vague, but as Secretary Lane said, "If you have enough red blood, it can be done." The Director of the Organization was put on a dollar a year basis in the Bureau of Education and a printing fund allowed. Dr. Willard S. Small welcomed assistance and gave support at every turn. This made coöperation possible. As I look back to the letters which came both to the Bureau and the Child Health Organization during those first few months from teachers and nurses, I seem to see their earnest faces rise before me, all begging for help in methods of interesting children themselves in building stronger bodies. As one teacher wrote us, "The ideas you send us are good. I appreciate your help, but I don't know quite how to go ahead."

As each letter was answered personally in addition to carefully developed printed matter, it was possible to suggest ways and means of meeting each particular situation and always to add that the teacher herself possessed a *laboratory* in her class room of pupils from which *we* hoped for help. Our faith was soon rewarded. A large proportion of the letters brought ideas, methods, devices which, though sometimes expressed in English that would scarcely warrant our belief that the teacher herself had been through High School, carried the earmarks of practical application.

The Child Health Organization has always emphasized health as a positive ideal presenting health to children in terms of beauty, strength and joy. Too much so-called health education is merely a matter of information about disease. To teach health effectively,

teachers and health workers must also experience health themselves. Children are not interested in health for its own sake. We must capture their interest and enthusiasm and make them realize that present delights and future happiness depend upon practising health habits. To do this we must first give simple concrete expression to the essentials of health and then interest the child to adopt them by appealing to his imagination.

The Child Health Organization of America began its Child Health campaign by stimulating children to use their imaginations as wands to transform the abstract idea of health into the imagery of daily thought and living. To each child it said, "Take your wand! Now point!" and presto! From the pages of story books, plays and rhymes, from the antics of clowns, from the tinkle of the Health Fairy's bell, tumbled the Health Habits.

Dramatic health teaching was the method that the Child Health Organization first adopted to demonstrate to teachers and nurses all over the country that health can be taught in the schools. To serve as a guide in putting over school health programmes, the organization formulated these five health essentials:

1. A scale in every school.
2. Every child's weight record sent home on the monthly report card.
3. Time allowed in every school day for interesting children in the establishment of health habits.
4. A hot school lunch available for every child.
5. Teachers trained in Normal Schools to teach health habits.

City and State Superintendents became interested in the Child Health Organization's programme, often through their teachers' enthusiasm, and requests for a course of study were frequent. To meet this need, a conference was called in December, 1920. Fifty people gathered together from all sections of the country for a three days' meeting. The question then was, *can* teachers and health workers teach health in the schools? The conference was instrumental in bringing many people together who had been working in the same field along parallel lines unconscious of each other. Much work has been done since then and almost a new point of view created. From all over the world we are asked for assistance in teaching health to school children and all recognize that this is a problem for the men and women of science and the educators to work out together.

The great questions to be solved in health education today are: How can the teacher best teach health? How can scientific knowledge be interpreted to the child in the schoolroom. These were the problems discussed at the conference on health education and the preparation of teachers called by the Child Health Organization of America and the U. S. Bureau of Education at Lake Mohonk, the

last week in June. No one of the 103 members of that conference questioned the desirability of teaching health. That was taken for granted. The school as the logical place to teach health, and the scale as an instrument for determining a child's nutrition, were definitions that had been unreservedly accepted by the educators, nurses and doctors at the Conference.

The chief concerns were the health service that should be given the students themselves in training schools and colleges and the courses they should take to be prepared to teach health.

Upon the preparation of our future teachers, lies the responsibility for the success of health education. To everyone at the Conference came the realization that our teachers must be health-minded. They must feel health and experience health before they can teach it to others, even though their mental training is adequate and their school equipment perfect. Dr. Caroline Croasdale of the New York State College for Teachers at Albany gave the crux of the matter, when she said:

The health ideal placed before the teacher must be that of positive health. She must really appreciate and understand that it no longer suffices to be simply not sick, she must aim to be always gloriously well. I should prefer my young teacher of health ideals to be thoroughly well and happy herself, with enthusiasm and no methods—at least, ready-made ones—than to be even a little neurotic, a trifle hollow-chested, but method perfect. Let her be so well that she oozes health and happiness, and I am sure her methods will take care of themselves.

As a nurse, Miss Jean feels that there are tremendous opportunities for nurses to help the teachers in health education programmes. By their ability to interest the teachers in having the remedial defects of the pupils corrected, by their enthusiasm for positive, joyous health, they can render valuable service in developing the power of the idea that children can be interested in health.

On the last evening of the Mohonk Conference, Miss Jean announced that the Commonwealth Fund has decided to finance a thorough child health programme in three typical cities, for a period of five years. The general qualifications of the first city to be selected are that it should be from 15,000 to 25,000 in population with an infant mortality of approximately 100 per 1000 live births, or greater. The responsibility for carrying out this comprehensive child health programme is placed upon the American Child Hygiene Association, and the Child Health Organization of America. A joint committee will have charge of all general policies and plans.

After careful consideration the Committee has decided that the first city to be assigned in developing a thorough programme for child health will be selected from the upper half of the Mississippi Valley

region. Two other cities are to be selected in other sections of the country after work has been well started in the first. The general qualifications of the first city are that it should be from 15,000 to 25,000 in population with an infant mortality of approximately 100 per 1000 live births, or greater. It must also show a desire to coöperate in the work during the five-year period and a reasonable prospect of assuring responsibility for carrying it on in the future.

The work will be developed in such a manner as to enlist the coöperation of physicians, public health nurses, school nurses, and all other individuals and agencies interested in health and child welfare in the communities selected. The interest and coöperation of teachers in the school health programme will be vital to the success of the undertaking. No fund can finance a health programme in every nook and corner of the country, but if the cities in which the demonstrations take place devote every available resource to making them practical working programmes for all communities, the Commonwealth Fund will have made possible a long step forward in helping to bring health and happiness to every child.

ITEM

THE LAKE MOHONK CONFERENCE

AN exceptionally interesting conference was held June 26-July 1, at Lake Mohonk, New York. Health teaching in its many forms is one of the vital questions of today, as indeed it has been, whether recognized openly or not, since the dawn of civilization. But of late years there has been a new awakening on the part of all thoughtful people to the knowledge that though health is indeed a heritage of the race, until the "habit" of health so far as human beings can attain it, is firmly established, *teaching health* must be of recognized and immense importance. While great and small experiments in this new tide of enthusiasm have been constantly made there is still an overwhelming amount of ignorance even amongst those whose business in life it is to know and to impart that knowledge. It was with the desire to bring together the leaders of health education and to pool their theories and experiments that this conference was called by the United States Bureau of Education and the Child Health Organization of America. Health Education and the Preparation of Teachers was the title given to the conference and in addition to the formal programme and discussions, round table conferences were conducted daily to consider how the subjects discussed could best be given to teachers through Normal Schools and Colleges, teacher training classes and institutes, and through other channels which reach the teacher.

The programme covered, during the week, papers and discussions on: Subject Matter in Health Education; The Place of Health Education in the Curriculum; Incentives and Motives in Health Education; The Promotion of Health

Habits—Successes and Failures; The Preparation of Teachers in Health Education.

Solid food apparently, but the vigor, enthusiasm and humor infused into the entire conference by the speakers and leaders of the discussions made the meetings of such absorbing interest that no one could be found to regret spending summer days—and nights—indoors with the outdoor lures of Mohonk continually calling. The conference, which was limited to 100 people, was made up of specialists and leaders in education from all over the country. Dr. C. E. A. Winslow, Dr. Maurice Bigelow, Professor Patty Smith Hill, Dr. E. V. McCollum, Mrs. Isabelle Baker, Miss Mabel Bragg, were among the many who spoke. Fifteen nurses were present. An impression gained was the lively and eager interest taken in the presentation of health to students by teachers in all parts of the country and in all varieties of schools and training courses, and the very interesting experiments being made to "put it over."

The result of the conference was a set of resolutions embodying the practical training in health education of students in normal schools and colleges and also the content of a course in health teaching.

TALKS TO MOTHERS

The Maternity Center Association of New York, announces its publication of a series of twelve "Talks to Mothers" for the benefit of women in all parts of the country. It is said that more women between the ages of fifteen and forty-five die from causes incident to maternity than from any other cause except tuberculosis. The majority of these deaths are due to ignorance—to the fact that the mothers didn't know that care is necessary if their lives and the lives of their babies are to be protected. It is the function of the new publications to dispel that ignorance—to convince mothers that they must seek proper medical and nursing care. Dr. Haven Emerson, former Health Commissioner of New York City and an active member of our Medical Advisory Board, estimates that only one woman in seventeen in the United States receives the benefit of modern medical and nursing science at childbirth. The only way to solve the problem is through education. The mothers must be convinced that care is needed. The pamphlets may be secured from the Maternity Center Association, 370 Seventh Avenue, New York City, at prices ranging from twenty-five cents per set up to \$12.00 for 10,000 sets.

TOO LATE FOR CLASSIFICATION

COLORADO STATE BOARD OF NURSE EXAMINERS will hold their fall meeting at the State House in Denver, on September 5, 6, 7, 1922. For further information write to the Secretary, Miss Louise Perrin, State House, Denver, Colo.